

如需遞交填妥表格 When submitting this form:

請緊記簽署作實 Please ensure that you have signed where necessary.

請勿遞交相同表格 Please do NOT send duplicate copies.

永明彩虹強積金計劃 – 僱主計劃更改自願性供款額表格

SUN LIFE RAINBOW MPF SCHEME – EMPLOYER SCHEME VOLUNTARY CONTRIBUTION CHANGE FORM

本表格將取代所有其他之前已遞交行政管理人的表格內的有關條款。所有部分須以英文正楷填寫。

This form supersedes the relevant terms in any previous form(s) which has/have been submitted to the Administrator. All sections below should be completed in English and in BLOCK letters.

第一部分 Section I 僱主資料 EMPLOYER DETAILS

僱主名稱 Employer Name _____

僱主編號 Employer No. _____ 隸屬中心編號 Reporting Centre No. _____

第二部分 Section II 修改細則 AMENDMENT REQUEST

請在適當方格加上剔號 (✓)。 Please check (✓) the appropriate box(es).

生效日期 Effective Date

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 (日/月/年 DD/MM/YYYY)

發放薪金形式 Payroll frequency

此修改將適用於所有成員，否則請列明受影響之成員類別或受影響之僱員姓名：
The change will be applied to all members, otherwise, please specify affected
Category of Employees or names of the affected Employees: _____

每年一次 Yearly 每月一次 Monthly 每兩週一次 Bi-Weekly 其他，請詳列 Others, please specify _____

成員類別 Category of Members

如新增成員類別，請填妥“供款定義”及“歸屬權益比率”。如刪除成員類別，請提供成員名單及受影響僱員之新類別。
Please complete “Contribution Definition” and “Vesting Scale” for adding new Category of Members. Please provide member list for deleting Category of Members and affected employee's new category

新增 Add / 刪除 Delete * _____
 新增 Add / 刪除 Delete * _____

資格 Eligibility

此修改將適用於此表格最終的生效日期或之後受僱的成員
The change will be applied to all new members who are employed on or after the Final Effective Date of this form

- 自願性供款由僱主作出強制性供款同時開始
Voluntary contributions start from the day of making Employer mandatory contribution
- 由僱用日起計第一個曆月的首日（若僱用日是曆月的首日，便由僱用日起計）開始供款
On the 1st calendar day of the month coincident with or immediately following the date of employment
- 由僱用日起計第 _____ 個完整曆月後的首日開始供款
On the 1st calendar day of the month after _____ completed month(s) of employment
- 其他，請詳列
Others, please specify _____

* 請刪除不適用者。 Please delete as appropriate.



供款定義 Contribution Definition

此修改將適用於此表格最終的生效日期或之後開始的供款期間及所有成員，否則請列明受影響之僱員類別或受影響之僱員姓名：

The change will be applied to the contribution period starts from the Final Effective Date of this form and to all members, otherwise, please specify affected Category of Employees or names of the affected Employees: _____

請選一項 Please choose ONE only [請在適當方格加上剔號(✓)。 Please check (✓) the appropriate box.]

方案一：按固定金額 Option 1 : By flat amount

	成員級別 Member Class Description	僱主供款 Employer's Contribution	僱員供款 Employee's Contribution
	新增 Add / 刪除 Delete *		
	新增 Add / 刪除 Delete *		
	新增 Add / 刪除 Delete *		
	新增 Add / 刪除 Delete *		

方案二：按“入息”百分比 Option 2 : By percentage of “Income”

請說明“入息”定義(此定義亦適用於僱員作出的自願性供款)。 Please define “Income” (this definition will also apply to voluntary contribution made by the employees).

基本薪金

Basic salary only

有關入息(包括任何工資、薪金、休假薪酬、費用、佣金、花紅、酬金、額外賞賜或津貼，但不包括遣散費或長期服務金)

Relevant income (including any wages, salaries, leave pay, fees, commissions, bonuses, gratuities, perquisites or allowances, except severances or long service payments)

自願性供款率(以“入息”的一個百分率計算) Rate of Voluntary Contribution (as a percentage of “Income”)

	成員類別、級別或已滿的服務年 Category of Member, Grade or Completed Years of Services	僱主自願性供款 (%) Employer's Voluntary Contribution (%)	僱員自願性供款 (%) Employee's Voluntary Contribution (%)
	新增 Add / 刪除 Delete *		
	新增 Add / 刪除 Delete *		
	新增 Add / 刪除 Delete *		
	新增 Add / 刪除 Delete *		

享有權益 Benefit Entitlement

於下列情況下，僱員或其遺產代理人提取 100%僱主的自願性供款

An employee or his personal representative is entitled to 100% of the Employer's voluntary contribution up to the date of event upon

僱員已屆非法定正常退休 _____ 歲

The employee attaining the non-statutory normal retirement age of _____

僱員已屆非法定提早退休 _____ 歲

The employee attaining the non-statutory early retirement age of _____

僱員在受僱期間身故

The death of the employee during the employment with his employer

僱員由於完全喪失行為能力而離職

The employee leaving service of the employer due to total incapacity

僱員實際退休時，須符合以下條件：

(i) 僱員須在非法定正常退休年齡後繼續受僱於僱主；(ii) 僱主繼續代僱員作出自願性供款；及(iii) 該僱員在其實際退休之前沒有提取其任何自願性供款

Actual retirement of the employee provided that:

(i) the employee continues to be employed by the employer after the non-statutory normal retirement age; (ii) the employer continues to make voluntary contribution on behalf of the employee; and (iii) such employee has not withdrawn any of his voluntary contribution prior to his actual retirement

其他備註 Other Remarks:

* 請刪除不適用者。 Please delete as appropriate.

歸屬權益比率 Vesting Scale

此修改將適用於所有成員，否則請列明受影響之成員類別或受影響之僱員姓名：
The change will be applied to all members, otherwise, please specify affected
Category of Employees or names of the affected Employees: _____

請在方案一或方案二的方格內加上剔號(✓)，或在方案三之下註明適用的百分率。
Please check (✓) either option 1 or option 2 or specify the applicable scale under option 3.

成員類別 Category of Member	供款種類 Contribution Type	已滿的服務年數 Completed Years of Service	歸屬權益百分率 Vesting Percentage		
	<input type="checkbox"/> 定期自願性供款 Regular Voluntary Contribution		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> 由其他強積金計劃轉入資產 Fund assets transferred from other MPF scheme	少於一年 Less than 1	方案一 Option 1	方案二 Option 2	方案三 Option 3 (如有需要， 請另附歸屬表) (Please attach your own vesting scale if necessary)
		1	0%	0%	%
		2	10%	0%	%
		3	20%	0%	%
		4	30%	30%	%
		5	40%	40%	%
		6	50%	50%	%
		7	60%	60%	%
		8	70%	70%	%
		9	80%	80%	%
		10年或10年以上 10 or more	90%	90%	%
	<input type="checkbox"/> 由其他公積金計劃轉入資產 Fund assets transferred from ORSO scheme		100%	100%	%

解僱安排 Dismissal Arrangement:

請提供更改後安排。 Please provide information after changed arrangement.

“服務”的定義 Definition of “Services” for Vesting

就歸屬權益而言，請說明“服務”的定義。 Please define “Service” for Vesting.

此修改將適用於所有成員，否則請列明受影響之成員類別或受影響之僱員姓名：
The change will be applied to all members, otherwise, please specify affected
Category of Employees or names of the affected Employees: _____

從受僱之日起計

From the date of employment

從加入自願性供款之日起計

From the date of joining the voluntary contribution

終止全部成員類別自願性供款 Cessation of Voluntary Contribution for all member classes

重要事項:

- 僱主須於最少一個月前通知行政管理人以更改自願性供款。
- 請注意，任何與強制性供款或自願性供款有關之修改，若會損害成員在計劃下的既有利益或累積權益，則該項修改須在獲得強制性公積金計劃管理局(“積金局”)的批准後方可生效。最終的生效日期將以下列生效日期或積金局授權的批准生效日期兩者中較後者為準。若不需要積金局的批准，修改將於下列「生效日期」生效。
- 在一般情況下，修改只適用於將來的日期。
- 受託人在接受此表格上之修改前或需僱主提供附加資料(包括但並不限於「成員同意書」)。

IMPORTANT NOTES

- At least 1 month's prior notice to the Administrator is required for Employers to make changes to their voluntary contribution.
- Please note that any changes relating to Mandatory Contribution or Voluntary Contribution that will alter to a member's detriment either his/her vested benefits or accrued rights under a registered scheme would require approval from the Mandatory Provident Fund Schemes Authority (the "Authority") before the change can take effect. The change will take effect from the later of the below stated effective date of change or the date on which the Authority approves the change (the "Final Effective Date") as authorised by the Authority. If the Authority's approval is not required, change(s) will take effect on the below "Effective Date".
- In normal circumstances, changes should only be effected on a future date.
- The Trustee may require additional information, including but not limited to 'Consent by Members' before accepting the changes stated on this form.

第三部分 Section III 個人資料收集聲明 PERSONAL INFORMATION COLLECTION STATEMENT

本人/吾等明白及同意永明信託有限公司(「受託人」)可以將其所收集的任何個人資料(不論由此申請表所收集或由其他途徑取得)作以下用途:

(i) 處理本人/吾等的此項申請及任何其他申請; (ii) 為本人/吾等參與本計劃; (iii) 管理本人/吾等於本計劃的供款和累算權益的事宜; (iv) 進行客戶調查; (v) 為客戶研究及設計金融、保險或退休金產品; (vi) 為本人/吾等甄選及參與獎賞、忠實或特選客戶計劃; (vii) 因上述目的與本人/吾等聯絡; (viii) 與上述目的直接有關的任何其他目的; 及 (ix) 為遵守適用的法例、法規或法庭命令。

受託人可為以上目的披露本人/吾等的個人資料予 (a) 為協助受託人就上述用途(不論在香港或其他地方) 而提供服務的第三方, 包括計劃管理人(條件是有關承辦商須把所有個人資料保密並只會為提供有關服務而使用個人資料); (b) 本人/吾等的銀行作繳款用途; (c) 本人/吾等的保險經紀(如有); (d) 本人/吾等的強積金中介人; (e) 受託人的關連公司(根據公司條例訂明)包括保險公司及金融服務機構; (f) 受託人及其關連公司(不論在香港與否) 為遵守監管當局或其他機構發出之指引或其就法例、法規或法庭頒令所約束或規定之責任而需向其作出披露的任何人士; 及(g) 按法例要求或准許的其他人士。

受託人可就法例准許或於獲得本人/吾等的同意後披露或將本人/吾等的個人資料作其他用途。

本人/吾等明白本人/吾等所提供之個人資料均屬自願, 然而倘若未能提供所需個人資料, 可導致受託人無法處理本人/吾等的申請。本人/吾等有權查閱及要求更正受託人持有有關本人/吾等的個人資料, 有關要求可以書面形式郵寄至香港九龍紅磡德輔道中 18 號海濱廣場一座 10 樓卓譽金融服務有限公司退休金管理經理。受託人可就處理任何該等要求收取合理費用。

I/We understand and consent that, any personal data collected by Sun Life Trustee Company Limited ("Trustee") (whether collected in this application form or otherwise) may be used by the Trustee for the following purposes:

(i) processing this application and any other applications I/we make; (ii) enrolling me/us in the Scheme; (iii) administering and managing my / our contributions and accrued benefits under the Scheme; (iv) conducting customer surveys; (v) researching and designing financial, insurance or pensions products for customer use; (vi) selecting and participating in reward, loyalty or privileges program and related service for me/us; (vii) contacting me/us for the above purposes; (viii) purposes which are directly related to the above purposes; and (ix) complying with applicable laws, regulation or court order.

The Trustee may disclose my/our personal data for the above purposes: (a) to third parties who provide services in Hong Kong or elsewhere which assist the Trustee to carry out the above purposes, including scheme administrator (provided that such contractors are required to keep all such personal data confidential and may only use the personal data to provide those services); (b) to my/our bank for payment purposes; (c) to my/our insurance broker (if any); (d) to my MPF intermediaries; (e) to the Trustee's related companies (as defined in the Companies Ordinance) including insurance companies and financial services companies; (f) to any person to whom the Trustee or its related companies (inside or outside Hong Kong) is under an obligation to make disclosure under the requirements of any law, regulation or court order binding on or applying to or to which the Trustee or its related companies (inside or outside Hong Kong) is subject to, or under and for the purposes of any guidelines issued by regulatory or other authorities with which the Trustee or its related companies (inside or outside Hong Kong) is expected to comply and (g) as otherwise required or permitted by law.

The Trustee may also use and disclose my/our personal data in other ways with my/our consent or as otherwise required or permitted by law.

I/We understand that the information I/we give is voluntary, but failure to provide the requested personal data may mean the Trustee is unable to process my/our application. I/We have the right to seek access to and request correction of any personal data the Trustee holds about me/us by sending a written request to The Manager, Pensions Administration Department, BestServe Financial Limited, 10/F, One HarbourFront, 18 Tak Fung Street, Hung Hom, Hong Kong. The Trustee may charge a reasonable fee for the processing of any such requests.

第四部分 Section IV 聲明及獲授權簽署人 DECLARATION AND AUTHORIZED SIGNATORIES

本公司(僱主)謹此確定以上細則及附上之資料(如有)皆為真實正確並明白受託人在接受此表格上之修改前或需本公司提供附加資料(包括但並不限於「成員同意書」), 另如有關修改需經由強制性公積金計劃管理局批核, 最終的生效日期將以強制性公積金計劃管理局授權的批准修改生效日期或在本表格內所列的生效日期兩者中較後者為準。

We, the Employer, hereby confirm that the above details and the attached information (if any) are true and correct. We understand that the Trustee may require additional information, including but not limited to 'Consent by Members' before accepting the changes stated on this form and should the change be subject to the Mandatory Provident Fund Schemes Authority's (the "Authority") approval, the effective date of change will be the later of the final approved effective date as authorized by the Authority or the "Effective Date of Change" stated on this form.

謹代表僱主
獲授權人簽署及公司蓋章:
For and on behalf of the Employer
Authorised Signature(s) with Company Chop:

請簽署及蓋章 Please sign & chop here 

日期 Date :

請將填妥表格交予: 永明彩虹強積金計劃行政管理人 — 卓譽金融服務有限公司
香港九龍紅磡德輔道中 18 號海濱廣場一座 10 樓 電話 3183 1888 傳真 3183 1889

Please send the completed form to: Sun Life Rainbow MPF Scheme, The Administrator, BestServe Financial Limited
10/F, One Harbourfront, 18 Tak Fung Street, Hunghom, Kowloon, Hong Kong Tel 3183 1888 Fax 3183 1889

請勿遞交相同表格; 如透過傳真遞交表格, 請保留正本以作記錄。

Please do NOT submit duplicate forms and keep the original copy for your own record if you are submitting via fax.